PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

AES 003-002

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA											THAN	
	· 		(Column 1)		(Column 2)		TY	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			42					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			<i>IJ</i> ② minus 20=		* 22			X\$ 9=		OR	X\$18=	396
INDEPENDENT CLAIMS			6 minus 3 =		* 3			X42=		OR	X84=	252
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		· · · · · · · · · · · · · · · · · · ·			+140=		OR	+280=	_
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		<u>L</u>	TOTAL	,	OR	TOTAL	1398
	C	LAIMS AS A	MENDED	NDED - PART II				•			OTHER	
	,	(Column 1)	(Colum					SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ***		CLAIM	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL DIT. FEE	`	OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	AD	DII. FEE		ı	ADDIT. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JUIPLE DEF	PENDENT	CLAIM		╵┟╴	+140=		OR	+280=	
								TOTAL DIT. FEE		ΛD	TOTAL	
	(Online) (1)									lon	ADDIT. FEE	
г		(Column 1) CLAIMS		(Colur		(Column 3)				l	F****	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	;	X\$ 9=	·	OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT (140			. 200-	
*	If the entry in colu	mn 1 is less than t	ne entry in colu	ımn 2, write	e "0" in co	lumn 3.	L	+140= TOTAL		OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." A									OR	TOTAL ADDIT. FEE	
		nber Previously Pa					r found	in the app	propriate box	k in co	lumn 1.	